USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF							COURT CASE NUMBER		
UNITED STATES OF AMERICA DEFENDANT						07-00200-CG			
MICHAEL LEVAR HOPKINS						TYPE OF PROCESS Preliminary Order of Forfeiture			
NAME OF IT	NDIVIDUAL, CO	MPANY, C	ORPORATION. I	ETC. TO SERVE OR D	ESCRIP7	TION OF PROPERTY	TO SEIZE OR	CONDEMN	
SERVE J Four Thous	sand seven hun	dred and	thirty-seven do	ollars (\$4,737.00)		07-DEA-4953	49		
AT ADDRESS (S	Street or RFD, Apa	rtment No.,	City, State and Zi	IP Code)					
c/o USMS									
END NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of process to be			
						served with this Form 285			
Deborah J. Rhodes United States Attorney 63 South Royal Street, Suite 600 Mobile, AL 36602						Number of parties to be served in this case			
						Check for service on U.S.A.			
PECIAL INSTRUCTIONS OR III Telephone Numbers, and Es	OTHER INFORM	IATION TI	HAT WILL ASSIS	ST IN EXPEDITING S	ERVICE	(Include Business and	Alternate Add	Iresses,	
0	1		1					For the state of t	
ignature of Attorney other Griginato equesting service on tehalf of: Image: Plaintiff					TELEPH	TELEPHONE NUMBER DA		8	
								ä	
SPACE BELOW FO	DR LISE OF	IIS M					2/27/08		
cknowledge receipt for the tota mber of process indicated.	R USE OF U.S. MARSHAL ONLY DO NO Total Process District of Origin District to Serve Signature of Author				rized USMS Deputy or Clerk Date				
ign only for USM 285 if more in one USM 285 is submitted)	2				Brenda S. Matchett			02/28	
ereby certify and return that I the individual, company, corpo	oration, etc., at the	address sho	own above on the o	nce of service, have on the individual, comp	e executed any, corp	l as shown in "Remark oration, etc. shown at the	s", the process he address inse	49. 1	
I hereby certify and return that			lividual, company	, corporation, etc. name	d above (See remarks below)			
ume and title of individual serve	d (if not shown abo	ove)				A person of suit then residing in of abode			
ldress (complete only different t	han shown above)					Date	Time	am	
						Signature of U.S. Ma	arshal or Depu	ty	
Total Mileage including ende		ing Fee	Total Charges	Advance Deposits		Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00			
							\$0.00		
MARKS:	Returned	Unex	ecuted.						
INT 5 COPIES: 1. CLERK O	OF THE COURT					DDIOD I	EDITIONS MA	VDETICES	

- 2. USMS RECORD
- USIMS RECORD
 NOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00